

STD PREVENTION PARTNERSHIP NEWS

founded in 1992 to promote strategies to reduce the incidence and impact of STDs through support and encouragement of partners among private, voluntary, and public sectors

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This first issue of STD Prevention Partnership News highlights recent projects and activities. The Partnership anticipates biannual publication of this newsletter.

Microbicides Top Agenda for Partnership Summer Meeting

In the world of innovative STD technologies, microbicides are perpetually "Miss Congeniality" in a pageant that reserves its crown for vaccines and improved diagnostics. But 2000 has been a landmark year for this up-and-coming prevention option. Microbicides could have a significant impact on the STD and HIV epidemics, both in the US and globally, according to Polly Harrison and Megan Gottemoeller who discussed the latest science and policy challenges related to microbicides at the summer STD Prevention Partnership meeting in Washington, DC.

"Microbicides" are compounds that could be used vaginally or rectally to reduce the risk of transmission of STDs. They could be formulated in a variety of ways, such as gels, creams, suppositories, or films, and would ideally be inexpensive and available over the counter like condoms. Microbicides would offer an important complement to condoms because they are user-controlled, and would not require partner cooperation to use successfully. This aspect is particularly important for women, who currently have no method within their autonomous control to prevent STD and HIV. The science is promising, too. Researchers are developing microbicides that could kill STD pathogens, boost the vagina's natural defenses against disease, or inhibit viral entry or replication in vulnerable human cells. In fact, there are over sixty product leads in various stages of development. This is good news in the wake of data released at the Durban AIDS Conference indicating that nonoxynol-9, an existing over-the-counter spermicide that many hoped could be a first-generation microbicide, was associated with increased, not decreased, risk of HIV infection

when used frequently. Planned nonoxynol-9 clinical trials have been canceled and replaced by other microbicide products with different mechanisms of action.

The biggest obstacle to microbicide development is inadequate funding, given the urgent need and promising science. Most microbicide research is done by small biotech companies or academic and non-profit institutions which depend on public funding to pursue their research. Yet microbicides received only 1% of NIH's budget for AIDS research in FY1999. Over the last year, advocates and scientists have worked hard together to increase awareness of microbicides and to encourage greater public investment. In March, Microbicides 2000—the first international conference dedicated to microbicides—attracted 650 researchers, activists, and agency representatives, a third of whom were from developing nations. And both public and private funding for microbicide research has increased, including a grant from the Gates Foundation. However, in the absence of large pharmaceutical investment in this low profit-yielding area, more needs to be done to guarantee that within five years, women and men will have a safe and effective microbicide to help prevent STDs and HIV.

For more information, contact: Alliance for Microbicide Development, (301) 588-8092; www.microbicide.org or Megan Gottemoeller, Global Campaign for STD/HIV Prevention Alternatives, (301) 642-8701

Local STD Action Collaborative Projects Up and Running

Responding to one of its original goals, the STD Prevention Partnership is sponsoring three demonstration projects promoting collaborative efforts between community-based organizations and local health departments in innovative STD prevention. The program, which receives

funding from the Ford Foundation, specifically targets those most severely affected by STDs and their consequences, including men who have sex with men, women, adolescents, and minority populations. The project is under management of Partnership member, Academy for Educational Development. During the first year, the projects will conduct a local needs assessment and program planning to identify the STD prevention needs of the target populations in their communities and develop interventions. During the subsequent 2 years, the projects will implement interventions and evaluate their effectiveness. While all projects are required to work with health departments, they receive funds directly and not through health departments as has more typically been the case.

The three funded projects target different populations. *Community Call to Action* in Minneapolis targets adolescents and supports comprehensive community efforts to reduce STDs and unplanned pregnancy. The collaborative is made up of youth, community residents, and local community-based, non-profit and public organizations that are concerned about STDs and teen pregnancy in North Minneapolis. *Gay City Health Project* in Seattle promotes gay and bisexual men's health and works to prevent HIV transmission by building community, fostering communication, and nurturing self-esteem. Gay City focuses on social, educational, and empowerment activities targeting sexually active gay men, queer youth, older men, HIV positive and HIV negative MSM, and men of color. *The Latino Community Development Agency* in Oklahoma City works to enhance the quality of life of the Latino community in central Oklahoma through education, leadership, services, and advocacy. The agency aims to create bridges between existing programs and the needs of Latinos in the community. They will focus on STD prevention among local Latino youth of high school age.

All the projects will facilitate the participation of local service providers, community leaders, educators, and representatives of the target population in understanding and overcoming the barriers to STD prevention in their communities. They represent an exciting new application of "partnerships" to promote sexual health and prevent STDs.

For more information contact Rosanne Hoffman, Center for Community-Based Health Strategies at the Academy for Educational Development, (202) 884-8719.

About the STD Prevention Partnership

The Partnership is a group of over 50 diverse national organizations with a shared concern about the continuing spread of STDs. It was founded in 1992 by CDC to expand STD prevention capacity in the U.S. beyond public health to groups that represent populations at-risk for STDs, as well as health care providers and institutions that serve those populations. Its diverse membership includes traditional STD prevention and treatment service organizations as well as associations and groups with little activity focused on STDs but who share a concern about the economic, health care practice, and/or physical impact of STDs on their constituencies.

The Partnership aims to

- T foster awareness of current STD-related problems, as well as STD prevention resources and activities
- T provide a forum for collection of information and exchange of ideas to assist local organization in developing their own partnership/prevention efforts
- T assist national organizations in understanding the impact that STDs have on their constituents so they can increase their emphasis on STD prevention
- T provide the education of health care and other providers so they can respond effectively to people at risk for STDs.

Steering Committee, 2000

Frank Beadle de Palomo (co-chair)
Academy for Educational Development
Ruth Roman (co-chair)
National Council of La Raza
Debbie Coleman
American Nurses Association
Megan Gottemoeller
Alliance for Microbicide Development
Terry Hogan
National Network of STD/HIV Prevention Training Centers
Bernice Humphrey
Girls, Inc.
Kent Klindera
Advocates for Youth
Judy Lipshutz
Centers for Disease Control and Prevention
Charlie Rabins
National Coalition of STD Directors

For more information about the Partnership, visit:
www.cdc.gov/nchstp/dstd/partnership_dir.htm or call
404-639-8260.